<u>PATENŤ</u> Docket No.: 1400-35

APR 1 2005 SE

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Applicant** 

: Jeffrey J. Terlizzi

Examiner: DIANE I. LEE

Serial No.

: 10/650,182

Group Art Unit: 2876

Filed

: August 28, 2003

Dated: April 7, 2005

For

: MULTI-INTERFACE DATA ACQUISITION

SYSTEM AND METHOD THEREOF

Commissioner for Patents

P.O. Box 1450

Alexandria, VA. 22313-1450

**AMENDMENT TRANSMITTAL FORM** 

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [ ] Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established by a verified statement previously submitted.
- [] A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed.
- [X] No additional fee is required.

The fee has been calculated as shown below:

CLAIMS REMAINING AFTER PREVIOUSLY PRESENT RATE FEE OR RATE FEE  TOTAL  25 MINUS 25 = X 9 \$ X 18 \$0  INDEP. 4 MINUS 4 = X 42 \$ X 84 \$0  IFIRST PRESENTATION OF MULTIPLE DEP. CLAIM  X 135 \$ X 270 \$0  TOTAL  OR TOTAL \$0		(Col. 1)		Col. 2) (Col. 3)			SMALL ENTITY				SMALL ENTITY		
INDEP. 4 MINUS 4 = X 42 \$ X 84 \$ 0  □ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM X 135 \$ X 270 \$ 0		REMAI AFTER	NING	PREVIOUSLY					OR		RATE	ADDIT. FEE	
☐ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM X 135 \$ X 270 \$ 0	TOTAL	25	MINUS	25	=	X	9	\$		X	18	\$0	
	INDEP.	4	MINUS	4	=	X	42	\$		X	84	\$0	
TOTAL OR TOTAL \$ 0	☐ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						135	\$		X	270	<b>\$</b> 0	
						TOTAL			OR TOTAL		OTAL	\$0	

<sup>\*</sup> If the entry in Co. 1 is less than entry in Col. 2, write "0" in Col. 3.

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

ADDIT. FEE

I hereby certify that this correspondence is being deposited with the United States Postal Service afirst class mail, postpaid in an envelope, addressed to Commissioner for Patents, P.O. Box 1450 Alexandria, Virginia 22313 on April 7, 2005.

Dated: April 7, 2005

George Likourezos

<u>\$0</u>

<sup>\*\*</sup> If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

<sup>\*\*\*</sup> If the "Highest No. Previously Paid For" IN THIS SPACEs less than 3, enter "3". The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

- [] Please charge Deposit Account No. 50-2140 in the amount of \$\_\_\_. Two (2) copies of this sheet are enclosed.
- [] A check in the amount of \$\_\_\_\_ is enclosed.
- [X] Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 50-2140. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 50-2140 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,

George Likourezos

Reg. No. 40,067

Attorney for Applicant(s)

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GL/mn